FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:				
Estimated average burden hours per response 16.00				
hours per respon	se 16.00			

SEC USE ONL

DATE RECEIVED

Serial

Prefix

1402816

F	O	R	М	D
---	---	---	---	---

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPT	ION	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)		
Series A-4 Preferred Stock and Underlying Common Stock issuable upon conversion thereo	of .	
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE	
Type of Filing: New Filing Amendment	·	
A. BASIC IDENTIFICATION DATA	•	
Enter the information requested about the issuer	SEC Mall Proco	חתימם
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)		.,,
D2C Games Inc.		
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone d'unibe (Inchain	Area Code)
1810 Gateway Drive, Suite 115, San Mateo, CA 94404	650-292-1213	28
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (1991)	(Afea Code)
Brief Description of Business		
Video Game Developer		ANDI MBAN HADI MAT KAN
Type of Business Organization		
☐ limited partnership, already formed ☐ c	other (please	1/100 (1/100) HJDD (1/10 1/10)
business trust limited partnership, to be formed	08046	111
Month Year		
Actual or Estimated Date of Incorporation or Organization: 0 5 0 4	Actual EPROC	ECCED.
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:		トつつに「ブ

GENERAL INSTRUCTIONS

THOMSON REUTERS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

· A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; . Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☑ Director ☐ Promoter Beneficial Owner General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Orr, Scott Business or Residence Address (Number and Street, City, State, Zip Code) c/o D2C Games Inc., 1810 Gateway Drive, Suite 115, San Mateo, CA 94404 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Flaharty, Jim Business or Residence Address (Number and Street, City, State, Zip Code) c/o D2C Games Inc., 1810 Gateway Drive, Suite 115, San Mateo, CA 94404 □ Director ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Kohler, Paul Business or Residence Address (Number and Street, City, State, Zip Code) c/o D2C Games Inc., 1810 Gateway Drive, Suite 115, San Mateo, CA 94404 ☐ Executive Officer □ Director General and/or Promoter ☐ Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Chiruvolu, Ravi Business or Residence Address (Number and Street, City, State, Zip Code) c/o 755 Capital Partners, LLC, 23270 Mora Heights Way, Los Altos, CA 94024 Director ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) Wilson, Mark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Rubicon Venture Partners, I, L.P., 733 Glenmere Way, Redwood City, CA 94062 Check Box(es) that Apply: Director ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Promoter Managing Partner Full Name (Last name first, if individual) Cook, James Business or Residence Address (Number and Street, City, State, Zip Code) c/o D2C Games Inc., 1810 Gateway Drive, Suite 115, San Mateo, CA 94404 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) 755 Capital Partners, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 23270 Mora Heights Way, Los Altos, CA 94024 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) RVP Management 1, LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o Rubicon Venture Partners, I, L.P., 733 Glenmere Way, Redwood City, CA 94062

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Besseling, Bart Business or Residence Address (Number and Street, City, State, Zip Code) 704 Portofino Lane, Foster City, CA 94404 Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: ☐ Promoter General and/or Managing Partner Full Name (Last name first, if individual) Orr, Keith Business or Residence Address (Number and Street, City, State, Zip Code) c/o D2C Games Inc., 1810 Gateway Drive, Suite 115, San Mateo, CA 94404 Check Box(es) that Apply: □ Promoter Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer ☐ Director Check Box(es) that Apply: Promoter ☐ Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer ☐ Promoter ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

				_		B. INFOR	MATION	ABOUT O	FFERING					
1.	Has the	e issuer so	old, or doe	es the issu	er intend t	o sell, to ne	on-accredite	ed investors	in this offer	ing?	********		Yes	No
									ling under U	-			_	_
2.	What is	s the min	imum inv	estment th		•	•	-	•		•••••	\$N/A		
												<u> </u>	Vac	No
					•	-							Yes	No
. :	commi: a perso states,	ssion or s on to be l list the n	similar rer isted is an ame of th	nuneration associate e broker	n for solic ed person or dealer.	itation of p or agent of If more tl	urchasers in a broker of nan five (5)	n connection r dealer reg	n with sales istered with be listed a	of securities	or indirectly or in the offer id/or with a self persons of	ing. If		
Full 1		Last nam ot Applic	-	individual)									
Busir	ness or	Residence	e Address	s (Number	and Stree	t, City, Sta	te, Zip Cod	e)						
Name	e of As	sociated	Broker or	Dealer		·								
							icit Purchas	-					□Al	l States
[AI	.1 [[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]	[ID	1
[IL		IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	_
[M]	-	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	-
[R]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	-
Full 1			e first, if	individual)									
Busir		ONE Residenc	e Address	s (Number	r and Stree	t City Sta	te, Zip Cod	e)						
						.,,,	, —р + ч -	-,						
Name	e of As	sociated 1	Broker or	Dealer										
							icit Purchas						□Al	l States
[AI	.1 [[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]]	[ID	1
[1]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	-
[M′		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	_
[RI		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	
				indívidual		[0.]	[, 1]	[* / 1]	["	["']	- [** 1]	[" 1]	1110	
ruiti	•	Cast Haili ONE	ic ilist, ii i	ilioi v iduai	,		•							
Busin	ess or	Residenc	e Address	s (Number	and Stree	t, City, Sta	te, Zip Cod	e)						
Name	of As	sociated	Broker or	Dealer				··· ·						
		•												
							cit Purchas							
		All States	" or check	individu:	al States).						•••••		☐ AI	States
[AL	-] [[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL) [[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC)]
[M]	r] [[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	{ P A]
[RI	[]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$2,000,000.00	\$1,020,000.00
	☐ Common ☐ Preferred		<u> </u>
	Convertible Securities (including notes)	\$0	\$0
	Partnership Interests	\$0	- \$ 0
	Other (Specify)	\$0	\$0
	Total	\$2,000,000.00	\$1,020,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	φ <u>2,000,000.00</u>	41,020,000.00
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	2	\$ <u>1,020,000.00</u>
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)	0	\$0
}.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$ -0-
	Regulation A	N/A	\$ -0-
	Rule 504	N/A	\$ -0-
	Total	N/A	\$ -0-
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees		\$TBD
	Accounting Fees] \$
	Engineering Fees] \$
	Sales Commissions (specify finder's fees separately)] \$
	Other Expenses (identify)	_]
	7 . 1		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, N	NUMBER OF INVESTORS, EXPENSES A	ND USE OF PR	OCEEDS
	b. Enter the difference between the ag Question 1 and total expenses furnished in re "adjusted gross proceeds to the issuer."	sponse to Part C - Question 4.a. This differen	ce is the	\$ 2,000,000.00
5.	Indicate below the amount of the adjusted grefor each of the purposes shown. If the amount of the left of the estimated gross proceeds to the issuer set forth			
			Offic Dire	nents to cers, ctors, & Payments To iates Others
	Salaries and fees		□ \$	□ \$
	Purchase of real estate			
	Purchase, rental or leasing and installation	on of machinery and equipment		
	Construction or leasing of plant building	s and facilities		
	Acquisition of other business (including offering that may be used in exchange for issuer pursuant to a merger)	the value of securities involved in this or the assets or securities of another	□ \$_	□ \$
	Working capital			
	Other (specify):			
				\$
		••••	□ s	□ \$
	Total Payments Listed (column totals ad	lded)		\$2,000,000.00
_		D. FEDERAL SIGNATURE		·
follo	issuer has duly caused this notice to be sign owing signature constitutes an undertaking by taff, the information furnished by the issuer to	the issuer to furnish to the U.S. Securities and	d Exchange Com	nission, upon written request of
Issu	er (Print or Type)	Signature	Date	
D2(Games Inc.	Hott Vm	April (6	_, 2008
Nan	ne or Signer (Print or Type)	Title of Signer (Print or Type)	•	
Scot	t Orr	Chief Executive Officer		

END

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)